Outcome of repeat trabeculectomy with mitomycin-C
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Purpose: Trabeculectomy remains to be the most commonly performed penetrating procedure to reduce intraocular pressure (IOP) for patients with glaucoma. However the outcome of most of the trabeculectomies is affected by scarring or subconjunctival fibrosis. Our study aims to analyze the outcome of repeat trabeculectomy with MMC in eyes with previously failed filters.

Methods: Case records of 38 eyes of 37 patients with previous failed trabeculectomy who were subject to subsequent repeat trabeculectomy with MMC were reviewed retrospectively. Visual acuity, intraocular pressure , requirement of medications postoperatively and surgical success were assessed.

Results: Mean IOP reduced significantly from 33.0 ± 90 preoperatively to 16.2 ± 7.1 (p < 0.001) postoperatively at 12 months. Mean number of antiglaucoma medications reduced from 2.76 ± 0.83 preoperatively to 1.84 ± 0.99 postoperatively (p < 0.001). Surgical success was observed in 75.7% at 1 year (n = 32) with > 20% IOP reduction with or without adjunctive medications. Complete success of > 20% IOP reduction was achieved in 8.1% with no medication. 27% achieved partial success with 1 medication and 40.5% with 2 medications. Mean Log MAR V/A deteriorated from 0.80 ± 0.83 to 0.91 ± 1.02 at one year with no statistical significance. Failure was seen in 24.3% cases.

Conclusions: Repeat trabeculectomy with adjunctive mitomycin, used in higher concentration and longer duration, with appropriate selection of surgical site with viable conjunctiva plays a crucial role in the success of repeat trabeculectomies.